POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ELIZH		1271-27 1
O.I.P.E. CLASSIFIER			7 2 + -0
FORMALITY REVIEW	TH	900	5-17-01
RESPONSE FORMALITY REVIEW	-		66-do-

INDEX OF CLAIMS

✓ Rejected	N Non-elected
= Allowed	I Interference
 (Through numeral) Canceled 	A Appeal
÷ Restricted	O Objected

	÷	Restricted	0	Objected
Claim	Date	Claim	Date	Claim
Final Original		Final		Original Original
2		51		101
3 1	-++++-	52		102
4 11		54		103
5		55	- 	104
6		56		106
7		57		107
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		59		109
SV TINI	╅╅╇	60		110
13	- - - - -	62	- - - - - 	111
(3)	- - - - -	63		112
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16)		66	 	116
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22	┼┼┼┼┼ ┤	71 72		121
23	1 	73	++++	122
24		74	 	123
25		75	++++	125
26		76	 	126
27	╅╇┼┼┼┼	77		127
29	+++++	78		128
30	┤┤╸┦╸╏╸┩	79	+	129
31	 	81	++	130
32		82	 	131
33		83	++++	132
34		84		134
36	++++-	85		135
37	++++-	86		136
38	* 	87	++++	137
39	 	89	+++++	138
40		90		139
41		91	┾┾┼┼┼┤	140
42		92		141
43		93		143
44 45	++++	94	 	144
46		95		145
47	┝╁┼┼┼┼┼	96		146
48	┝╅╌╏╸ ╁╶╂╌╂╌┤	97		147
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50		100		149

Date

If more than 150 claims or 10 actions staple additional sheet here

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